

DESIGNATION AND APPOINTMENT OF DEPUTY TO DISBURSING OFFICER For use of this form, see AR 37-103; the proponent agency is USAFAC		EFFECTIVE DATE DISBURSING STATION SYMBOL		
<i>IMPORTANT - Submit this form to the USAFAC in quadruplicate. Also include one copy of TUS Form 5583 and one copy of TUS Form 3023 upon initial appointment or when there is a change in the official signature.</i>				
PART I - (To be prepared by Station Disbursing Officer)				
TO: Commander USAFAC ATTN: FINCE-C Indianapolis, Indiana 46249-0728	FROM: (Include ZIP Code)			
In order that the best interests of the Government may be conserved in the transaction of official business at this station, involving the disbursement of public funds, and pursuant to the authority contained in an act of Congress, approved 3 July 1926, 44 Stat. 888, Title 31, U. S. C. Sec 103a, I do hereby appoint				
<table style="width: 100%;"> <tr> <td style="width: 50%; text-align: center;"> _____ NOMINEE FOR DEPUTY (TYPED NAME IN FULL) </td> <td style="width: 50%; text-align: center;"> _____ GRADE AND BRANCH OF SERVICE/CIVILIAN </td> </tr> </table> <p>as my deputy for the purpose of having him (her) make disbursements as my agent and discharge all duties required by law and regulations to be performed by me as disbursing officer, and especially to sign in my name (countersigning in his (her) name) checks drawn on the Treasurer of the United States, such signature and countersignature to be in form as follows:</p>			_____ NOMINEE FOR DEPUTY (TYPED NAME IN FULL)	_____ GRADE AND BRANCH OF SERVICE/CIVILIAN
_____ NOMINEE FOR DEPUTY (TYPED NAME IN FULL)	_____ GRADE AND BRANCH OF SERVICE/CIVILIAN			
<table style="width: 100%;"> <tr> <td style="width: 60%;"> _____ TYPED NAME, AS SIGNED, OF FINANCE & ACCOUNTING OFFICER </td> <td style="width: 40%;"></td> </tr> </table>			_____ TYPED NAME, AS SIGNED, OF FINANCE & ACCOUNTING OFFICER	
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BY				
<table style="width: 100%;"> <tr> <td style="width: 40%;"> _____ SIGNATURE OF DEPUTY </td> <td style="width: 60%;"> I hereby consent and agree to be and remain liable and bound for acts performed or to be done and performed by the aforesaid deputy under this designation and appointment as fully and to the same extent as if such acts were done and performed by the undersigned principal. </td> </tr> </table>			_____ SIGNATURE OF DEPUTY	I hereby consent and agree to be and remain liable and bound for acts performed or to be done and performed by the aforesaid deputy under this designation and appointment as fully and to the same extent as if such acts were done and performed by the undersigned principal.
_____ SIGNATURE OF DEPUTY	I hereby consent and agree to be and remain liable and bound for acts performed or to be done and performed by the aforesaid deputy under this designation and appointment as fully and to the same extent as if such acts were done and performed by the undersigned principal.			
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PART II - (To be prepared by USAFAC)				
TO: Treasurer of the United States Check Accounting Division General Accounting Office Building Washington, D.C. 20226	FROM: Commander USAFAC ATTN: FINCE-C Indianapolis, Indiana 46249-0728			
APPROVED by Order of the Secretary of the Army				
<table style="width: 100%;"> <tr> <td style="width: 50%;"> _____ TYPED NAME, AS SIGNED, AND TITLE OF APPROVING OFFICER </td> <td style="width: 50%;"> _____ SIGNATURE </td> </tr> </table>			_____ TYPED NAME, AS SIGNED, AND TITLE OF APPROVING OFFICER	_____ SIGNATURE
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